



BRAZOS VALLEY COUNCIL OF GOVERNMENTS
P.O. DRAWER 4128 · BRYAN, TEXAS 77805-4128

REQUEST FOR INFORMAL HEARING OR REVIEW

I, _____, am requesting an informal hearing/review of my termination/denial from the Housing Choice Voucher Program.

I am requesting a hearing because (use reverse side for more space):

I plan to bring the following parties with me during the informal hearing/review as witnesses:

I would like my hearing letter to be mailed to me at:

I acknowledge that the information I have provided in this request for an informal hearing/review is true and accurate to the best of my knowledge. I understand that I will be receiving a letter in the mail providing me with the status of my request and/or information regarding the location, date and time of my hearing/review. I understand that this will be the only communication I receive from the Housing Choice Voucher Program regarding my most recent request for a hearing/review.

Signature of Head of Household

Date

<i>For Housing Choice Voucher Staff Only:</i> Date Request Submitted: _____ Received within 10 business days of termination/denial letter? Y N Submit with file to HCV Program Manager	<i>For Housing Choice Voucher Program Manager Only:</i> Approved for Hearing: Y N Time and Date of Hearing: _____ Reason for Denial of Hearing/Review: _____ _____
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